

## STATEMENT OF DESIGNATION OF COUNSEL

Please use one form for each respondent.

MUR 5684

NAME OF COUNSEL: ABBE LOWELL

FIRM: CHADBOURNE & PARKE LLP

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WASHINGTON, DC 20036

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The above-named individual is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

ALEXIS MCGILL

Print Name

12/14/05  
Date

[Signature]  
Signature

Executive Director,  
Title

Citizen Change

RESPONDENT'S NAME: Citizen Change

ADDRESS: 1710 Broadway  
New York, NY 10019

TELEPHONE: HOME

BUSINESS

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